

## Salaries of State Health Department Personnel

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Median salaries of selected groups of State health department personnel have increased on an average of one-third during the 5-year period since 1947. The percentage increases ranged from a low of 20 percent for sanitary engineers to a high of 56 percent for sanitarians.

The real significance of these salary increases can only be discerned in the broader perspective of a decade or more of steadily rising living costs. Although knowledge of the salaries of public health workers was so fragmentary prior to 1947 that a sound evaluation of salary trends on a national scale was impossible, the information available indicated that during the early 1940's public health workers, as well as other public servants, were experiencing a persistent decline in real wages because of static salary levels.

To develop reliable and comprehensive salary data, the American Public Health Association and the Association of State and Territorial Health Officers in 1947 joined in asking the Public Health Service to participate in a 5-year series of nation-wide studies of salaries received by State and local public health workers. Results of these studies have been published each year (1, 2). This report summarizes the trends which have taken place in the salaries of State public health personnel during the 5-year period. Five-year trend data for salaries of local public health personnel will not be available until the next local salary study has been completed in the spring of 1952.

Data for the studies of the salaries of State public health workers were obtained directly

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from State health department payrolls. Two types of groupings were made in tabulating the salary data. One group includes salaries of personnel at the executive or director level. These are the State health officers and directors of dental public health, sanitary engineering, laboratory services, public health nursing, and vital statistics. Original plans to include directors of certain medical programs in this group were abandoned in 1950 because the increasing number of organizational combinations in State health departments was seriously affecting the comparability of positions from year to year and among the States. The other group includes personnel in the following professional categories (exclusive of the program directors included in the first group): medical, nursing, sanitary engineering, sanitation, nutrition, health education (added in 1948), statistical (added in 1949), laboratory, and business management (added in 1950). In all of the studies, data on all medical directors (other than those directing laboratory and vital statistics programs) have been included in the general group of medical personnel.

Salaries of part-time and seasonal employees, of trainees, of State health workers assigned to institutions, and of personnel assigned to activities performed normally by local health units were excluded from the study. When identifiable, salaries of all personnel assigned to local health units or State districts offering direct local health services were also excluded. Although organizational patterns, responsibilities of individual positions, and position nomenclature vary considerably from State to State, sufficient comparability exists to justify broad comparisons among States and to study national trends. The median salary—that salary below and above which half of all the

Median Salary

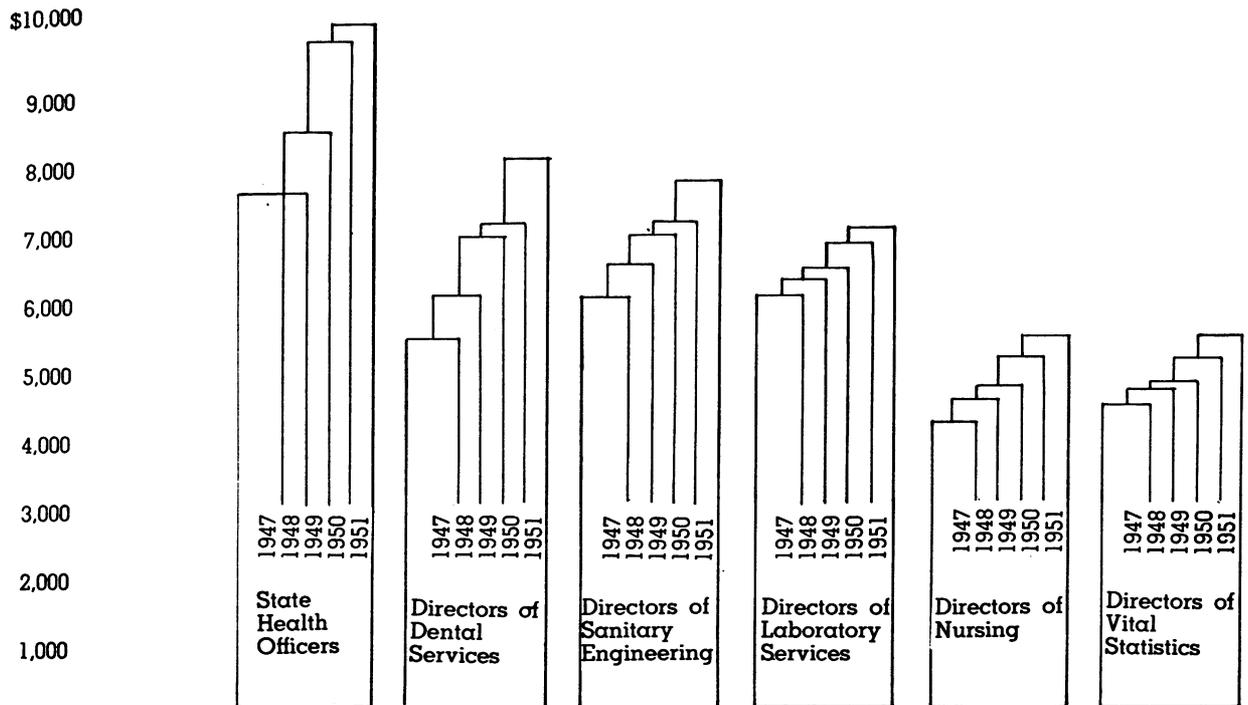


Figure 1. Median salaries of State health officers and selected directors of State health services, 1947-51.

individual salaries fall—has been used to measure trends in these studies.

Salaries of all groups included in the study increased during the 5-year period. Percentage increases in the median salaries of selected groups in State health departments between 1947 and 1951 are shown below :

	Percentage increase
State health officers.....	33
Directors of dental health services.....	50
Directors of sanitary engineering.....	29
Directors of laboratory services.....	25
Directors of public health nursing.....	29
Directors of vital statistics.....	21
Medical personnel.....	43
Sanitary engineers.....	20
Sanitation personnel.....	56
Professional laboratory personnel.....	21
Supervisory and consultant nurses.....	35

The table shows the distribution of salaries which were being paid in August 1951, the most recent period studied. Median salaries

in 1951 for the types of personnel which are not represented in the 5-year trend study are: nutrition, \$3,900; health education, \$4,300; statistical, \$3,900; and business management, \$5,700.

State Health Officers

The most strategic position in the salary structure is held by the State health officer. Difficulties in keeping public health salaries from lagging behind costs of living and the competitive market for professional personnel often center around the reluctance of State legislatures to modify specific statutory salary rates applicable to the State health officer's position. The most significant changes in these salaries have occurred during the past 3 years (fig. 1).

The trend can also be illustrated by other facts. In 1947, the annual salaries of State health officers ranged from \$5,000 to \$15,000. The median salary for health officers that year was \$7,500. Seven of these officials were then receiving \$10,000 per year or more, and 15 were

## Selected State health department personnel by specified salary intervals, August 1951

Salary intervals	State health officers	Medical personnel	Directors dental public health services	Environmental sanitation			Laboratory		Public health nurses		Directors vital statistics
				Directors sanitary engineering	Sanitary engineers	Sanitation personnel	Directors	Professional personnel	Directors nursing	Supervisory and consultant	
Total number	44	355	34	48	509	611	45	1,320	45	357	40
\$15,000 and over	4	0	0	0	0	0	0	0	0	0	0
\$14,000-\$14,999	1	2	0	0	0	0	0	0	0	0	0
\$13,000-\$13,999	1	1	0	0	0	0	2	0	0	0	0
\$12,000-\$12,999	8	7	1	1	0	0	1	0	0	0	0
\$11,000-\$11,999	3	3	0	0	0	0	0	0	0	0	0
\$10,000-\$10,999	9	41	1	4	0	0	2	2	0	0	0
\$9,000-\$9,999	6	80	4	7	6	0	5	8	0	0	1
\$8,000-\$8,999	4	77	12	10	23	3	6	4	0	0	3
\$7,000-\$7,999	7	88	10	12	14	5	10	14	5	0	3
\$6,000-\$6,999	1	45	6	10	66	15	10	40	8	7	9
\$5,000-\$5,999	0	10	0	4	122	50	7	122	21	54	12
\$4,000-\$4,999	0	1	0	0	155	210	1	256	11	157	9
\$3,000-\$3,999	0	0	0	0	120	274	1	559	0	137	3
\$2,000-\$2,999	0	0	0	0	3	54	0	315	0	2	0
Under \$2,000	0	0	0	0	0	0	0	0	0	0	0
Median salary	\$10,000	\$8,500	\$8,100	\$7,740	\$4,800	\$3,900	\$7,500	\$3,500	\$5,400	\$4,250	\$5,460

receiving less than \$6,600 per year. In 1951 State health officers' salaries ranged from \$6,500 to \$17,500 and the median salary had risen to \$10,000, or one-third higher than the 1947 median. Only one State health officer was receiving less than \$7,200 per year in 1951, while 14 were receiving \$12,000 or more, including 4 with salaries of at least \$15,000.

### Medical Personnel

As might be expected, the median salaries of medical personnel (exclusive of State health officers and the directors of the selected health services which were tabulated separately) increased in somewhat the same pattern as the median salaries for State health officers (fig. 2). The increase in median salaries of the medical group was 43 percent during the 5-year period. Although 54 percent of the group were receiving salaries of less than \$6,000 per year in 1947, only 3 percent were below the \$6,000 level in 1951. The proportion of medical personnel receiving salaries of \$9,000 or more increased from 1 percent in 1947 to 38 percent in 1951. Approximately 15 percent of the public health physicians in State health departments were receiving salaries of \$10,000 or more in 1951, and 10 were being paid at the rate of \$12,000 per year.

### Dental Directors

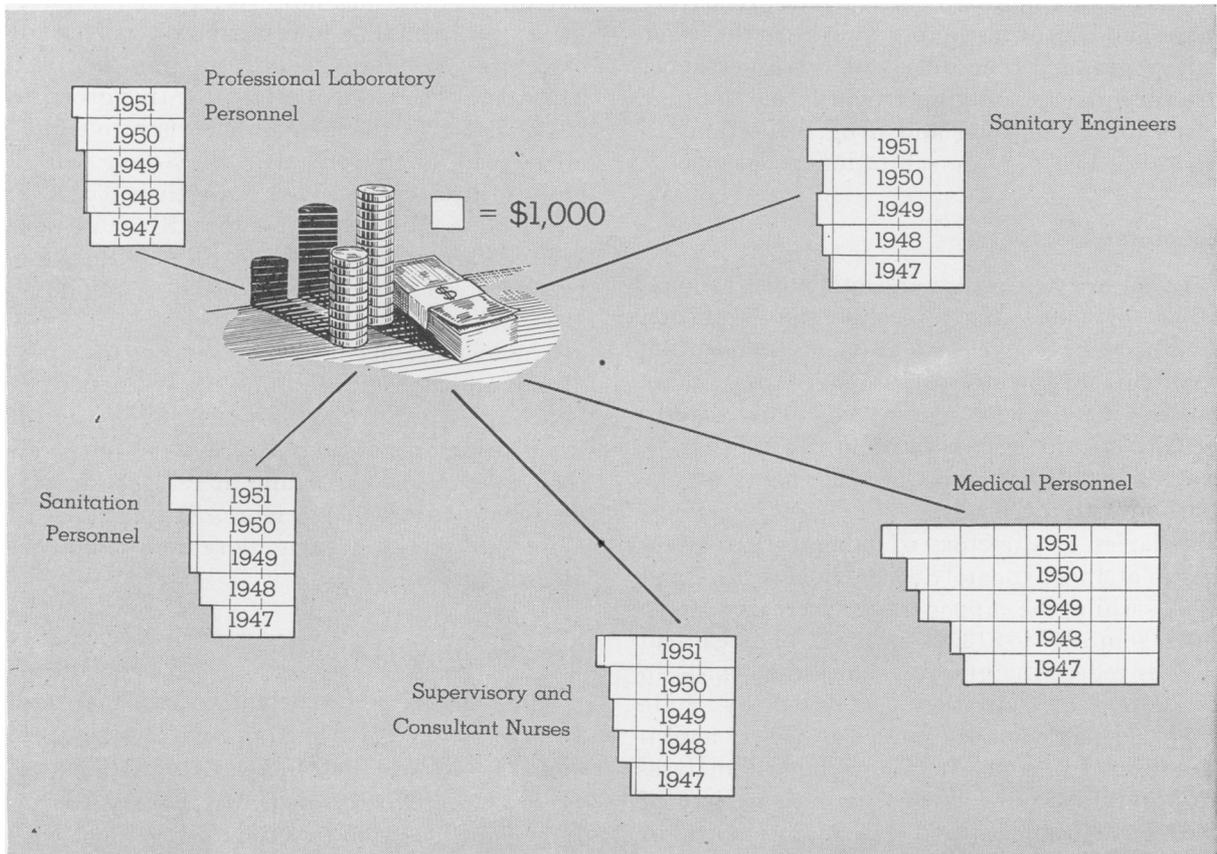
As a group, the dental directors rank next to physicians in the State health department salary structure. The median salary among the directors of State dental public health services increased from \$5,400 in 1947 to \$8,100 in 1951, an increase of 50 percent in 5 years. The 1951 median salary was \$1,000 above the highest 1947 salary. Only 6 of the dental directors were receiving less than \$7,000 in 1951, and 2 were receiving more than \$10,000. In 1947 the highest salary among dental directors was \$7,100, and 14 were receiving less than \$5,000.

### Environmental Sanitation Personnel

The percentage increase in the median salaries for the directors of sanitary engineering during the period of study was 29 percent; for other sanitary engineers, 20 percent; and for sanitation personnel other than engineers, 56 percent. The lower and upper limits of salaries for the directors moved upward with the general increase in salaries:

	1947		1951
Low	\$4,250	Low	\$5,178
High	11,000	High	12,372

The distribution of their salaries is approxi-



**Figure 2. Median salaries of selected groups of State health department personnel, 1947-51.**

mately the same as that for dental directors. Another index of the general improvement in salary status of these directors is the shift in the numbers receiving salaries of less than \$6,000. The 22 who were in this group in 1947 had been reduced to 4 in 1951. The change at the upper salary limit was less dramatic. At the end of the 5-year period there had been an increase of from only 2 to 5 receiving salaries of \$10,000 or more.

A somewhat different salary trend was found among the other sanitary engineers as compared with directors of sanitary engineering. They received the smallest percentage increase of all the groups studied. This was not particularly surprising since the group experienced a considerable numerical increase over the 5-year period. This would tend to depress the median salary because when large numbers of new employees are added to the staff they are generally employed in the lower salary brackets. Even

so, the changes in the salary distribution for this group were marked. In 1947 only 15 percent received \$5,000 or more per annum, while in 1951, 45 percent were in this category. The change at the \$7,400 level is more striking. Only 2 sanitary engineers were above this salary in 1947, but 38 were in this group in 1951. At the other extreme the number receiving less than \$3,200 was reduced from 41 in 1947 to 7 in 1951. The medians for sanitary engineers and sanitation personnel were:

	1947	1951	Percent increase
Sanitary engineers.....	\$4, 100	\$4, 900	20
Sanitation personnel.....	2, 500	3, 900	56

The large percentage increase in median salary for sanitation personnel still left the median for this group, dollar-wise, only one step removed from the lowest median rate in 1951. One explanation of the continuing low median rate in the sanitation group is the heterogeneous

character of the group. It includes relatively large numbers of inspectors who are in the lower salary grades. The duties of these personnel are very diverse, ranging from routine sanitary inspections and food and drug inspections to directing broad State sanitation programs.

### Laboratory

Laboratory directors and other professional laboratory personnel are, like the sanitation group, less homogeneous in their composition than most of the other selected groups of State health department employees. The heterogeneity of the group particularly affects the range of salaries and the placement of the median within the range.

Salaries of directors of laboratory services began at approximately \$3,600 in both 1947 and 1951, while the upper limit increased from \$10,300 in 1947 to \$13,475 in 1951. These broad ranges reflect the great variance that exists in the scope of activities performed by State health department laboratories. Their activities range from strictly bacteriological analyses to highly specialized research on a variety of technical problems and the manufacture of biological products. The considerable improvement in salaries in the upper brackets is reflected in a 25-percent median increase from \$6,000 to \$7,500 in the 5-year period and in the increase from 4 in 1947 to 15 in 1951 of those receiving more than \$8,000.

The duties of other professional laboratory personnel vary from the performance of routine serologic tests under supervision to independent and highly technical research investigations. The range and distribution of salaries within this group were similar to the data reported for sanitary engineers and sanitation personnel. There was a continuing low median rate, a more significant change in the distribution of salaries in the lower limits than at the top, and a relatively broad range in salaries.

### Public Health Nurses

Probably because the duties and responsibilities within the public health nursing groups vary less than in the other groups included in this study, the range of salaries is relatively

narrow. There was, however, a general movement upward. The lowest salary reported for directors of public health nursing in 1951, \$4,200, was the median salary for this group in 1947. By 1951 the median had risen to \$5,400, an increase of 29 percent in the 5-year period. Only 6 directors received more than \$5,000 in 1947, while 17 received less than \$4,000 in that year. Thirty-four public health nursing directors received more than \$5,000 per annum in 1951.

The increase in the median salaries of supervisory and consultant nurses was 35 percent between 1947 and 1951. In 1947, 81 percent of the nurses in this category were receiving less than \$3,600 per year, while in 1951, 90 percent were receiving \$3,600 or more. Approximately 17 percent were receiving more than \$5,000 per annum in 1951.

### Directors of Vital Statistics

The median salary of this group increased from \$4,500 to \$5,460 or 21 percent between 1947 and 1951—the smallest increase recorded for the program directors studied. In 1947 the salaries ranged from \$2,400 to \$8,000 per annum, with only 2 receiving more than \$6,000 per annum. In 1951 salaries of vital statistics directors ranged from \$3,240 to \$9,610, with 16 receiving more than \$6,000.

Throughout this series the director of vital statistics has been defined as the one in the State health department who had the immediate responsibility for directing the collection of vital records. Salaries of the chiefs of public health statistical units that in five States are independent of the division of vital statistics are not included in this group.

### REFERENCES

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- (2) U. S. Public Health Service: Salaries of local public health workers, May 1948, and Apr. 1949, 1950; Supplement No. 1: Salaries of nurses employed for public health work in local boards of education and in nonofficial agencies, Aug. 1949. Processed.